



U.S. SMALL BUSINESS ADMINISTRATION
ADVISORY COMMITTEE MEMBERSHIP - NOMINEE INFORMATION

OMB No: 3245-0124

Expires: 3/31/2004

1. Name: _____
2. Place of Birth: City _____ State _____
3. Date of Birth: Month _____ Day _____ Year _____
4. Home Address:
Street _____
City _____ State _____ Zip Code _____
5. Employer's Name and Address:
Name: _____
Street _____
City _____ State _____ Zip Code _____
Position Title _____
Type of Industry _____
6. Work Phone Number: Area Code _____
7. Are you on a Federal payroll? _____
8. Are you employed by a state government? If so, what is the position and is it an elective position or a non-career appointive position?
9. Are you an applicant for or recipient of SBA assistance? If so, please describe the type of assistance, the date you received or applied for it, and the current status of any obligation associated with the assistance.

For these purposes:

(a) An applicant or recipient of SBA assistance includes a sole proprietor, general partner, officer, director, shareholder or limited partner with more than a 10% interest in an entity, whether profit or non-profit, that applied for or received SBA assistance. Also included are members of the applicant's or recipients household.

(b) Assistance includes -

- a non-disaster business loan of any kind, whether direct or guaranteed;
- a surety bond guarantee;
- an SBA grant;
- a Small Business Investment Company (SBIC) license;
- an 8(a) sole source contract award;
- an application for or recent receipt of 8(a) status,
- an application for or recent receipt of Small Disadvantaged Business (SDB) certification,
- an application for or recent receipt of HUBZone certification,
- an application for or recent receipt of a certificate of competency.

- (c) Recent receipt means within 6 months of your nomination to serve on an advisory committee.

(Attach additional sheets if necessary)

10. Have you served or are you currently serving on any Federal boards, councils or commissions? If so, please give the names and dates of service.

(Attach additional sheets if necessary)

11. Character Information:

- a. Are you presently under indictment, on parole or probation? _____
- b. Have you ever been charged with or arrested for any criminal offense other than a minor motor vehicle violation (include offenses that have been dismissed or discharged)? _____
- c. Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation (including judgements withheld pending probation for any criminal offense other than a minor motor vehicle violation)? _____

12. Business Information:

Please provide details on any of the following:

- a. Suspension or debarment from Federal procurements,
- b. Suspension or debarment from non-procurements Federal assistance,
- c. Default on a Federal loan or Federally assisted financing,
- d. Suspension or revocation on conducting business with SBA under 13 C.F.R. § or other SBA regulations,
- e. Suspension or revocation of a professional or business license,
- f. Other circumstances with could be reasonably perceived as showing a lack of business integrity, such as a formal charge or finding by SBA of a failure to perform required responsibilities in connection with SBA assistance, or violations of SBA regulations or a civil judgment involving business conduct.

(Attach additional sheets if necessary)

Continuation Sheet

Note: The estimated burden completing this form is 10 minutes per response. You will not be required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AIB, 409 3rd St., S.W., Washington, D.C. 20416 and Desk Office for Small Business Administration, Office of Management and Budget, New Executive Office Building, room 10202 Washington, D.C. 20503. OMB Approval (3245-0124).PLEASE DO NOT SENDFORMS TO OMB. SUBMIT COMPLETED APPLICATION TO LENDER OF CHOICE